

**BUREAU OF SECURITY AND INVESTIGATIVE SERVICES**

P.O. Box 989002  
West Sacramento, CA 95798-9002  
(916) 322-4000  
[www.dca.ca.gov/bsis](http://www.dca.ca.gov/bsis)

**REPORT OF BATON PERMITS ISSUED**

This report, also referred to as roster, must be completed and sent to the Bureau within five working days following the issuance of baton permits (Business and Professions Code section 7553.5(c)). This roster must be typed or clearly printed. This report is also to be used to report voided permits.

1. DATE(S) COURSE GIVEN: START                      END		2. INSTRUCTOR NAME			
3. BATON FACILITY NAME		4. FACILITY CERTIFICATE NUMBER		5. INSTRUCTOR CERTIFICATE NUMBER	
6. BATON PERMIT #	7. NAME OF TRAINEE: LAST              FIRST              M.	8. DATE OF BIRTH	9. RESIDENCE ADDRESS: (Include number and street, city, state, and zip)	10. SOCIAL SECURITY NUMBER	11. SECURITY GUARD REGISTRATION NUMBER

**SIGNATURE OF INSTRUCTOR REQUIRED ON REVERSE SIDE**

# REPORT OF BATON PERMITS ISSUED

[illegible]

**I certify under penalty of perjury, under the laws of the State of California, that the listed permits were issued in accordance with section 7553.5 of the Business and Professions Code and that I was the instructor of said baton training course.**

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**INSTRUCTOR SIGNATURE**

DATE \_\_\_\_\_

**The official responsibility for the maintenance of this information is the Chief, Bureau of Security and Investigative Services, 2420 Del Paso Road, 2nd Floor, Sacramento, CA 95834. This information may be transferred to other governmental and/or enforcement agencies. Each individual has the right to review the records pertaining to themselves maintained by the agency unless the records are identified as confidential and exempted by section 1798.3 of the Civil Code.**